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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/711,591	09/27/2004	Michael Burr	2006579-0272 (CTX-093DV)	5590
	7590	8 FRIX SYSTEMS, INC.	EXAMINER	
TWO INTERN	ATIONAL PLACE			
BOSTON, MA	02110			PAPER NUMBER
			2142	
			MAIL DATE	DELIVERY MODE
			07/17/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Comment	10/711,591	10/711,591 BURR ET AL.	
Interview Summary	Examiner	Art Unit	
	JEFFREY NICKERSON	2142	
All participants (applicant, applicant's representative, PT	O personnel):		
(1) <u>JEFFREY NICKERSON</u> .	(3)		
(2) <u>Kellan Ponikiewicz (59701)</u> .	(4)		
Date of Interview: <u>14 July 2008</u> .			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant	2) applicant's representativ	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>1,10 and 11</u> .			
Identification of prior art discussed: None.			
Agreement with respect to the claims f) \boxtimes was reached.	g) was not reached. h) 1	٧/A.	
Substance of Interview including description of the gener reached, or any other comments: Examiner Nickerson substanding 112 1st and 2nd paragraph rejections. Applica asked if making claim 11 dependent on claim 10 would be agreed it would. (A fuller description, if necessary, and a copy of the ame allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached. THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGE INTERVIEW DATE, OR THE MAILING DATE OF THIS INFILE A STATEMENT OF THE SUBSTANCE OF THE INTIRequirements on reverse side or on attached sheet.	ant's representative agreed. And exercome double patenting warred and the examiner agreed. And exercome double patenting warred and exercome double patenting warred and examiner agreed.) EACTION MUST INCLUDE THE he last Office action has already R OF ONE MONTH OR THIRT ITERVIEW SUMMARY FORM,	e of claim 1 to over pplicant's representing. Examiner Normal Properties of the policies of th	ercome ntative lickerson er the claims claims DF THE LICANT IS THIS LATER, TO
Examiner Note: You must sign this form unless it is an	/Andrew Caldwell/ Superviso		

Application No.

Applicant(s)